



Handwritten initials: ZTW, RFB

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/609,206
		Filing Date	June 26, 2003
		First Named Inventor	Daniel J. POTTER, et al.
		Group Art Unit	3734
		Examiner Name	Diane D. Yabut
Total Number of Pages in This Submission	16	Attorney Docket Number	0B-044600US / 82410.0054

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement (\$____) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notice to File Missing Parts/ Incomplete Application (\$____) <input type="checkbox"/> A copy of the Notice to File Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) 7 pages <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition (\$____) <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney to Prosecute Applications Before the USPTO <input type="checkbox"/> Terminal Disclaimer (\$____) <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (\$____) (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> A self-addressed, prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Credit Card Payment Form for \$1,240.00 (1 page)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	David J. Kulik, Reg. No. 36,576/Scott A. Felder, Reg. No. 47,558 Wiley Rein & Fielding LLP 1776 K Street, N.W. Washington, D.C. 20036 Telephone: (202) 719-7313 Fax: (202) 719-7049
Signature	<i>[Handwritten Signature]</i>
Date	December 26, 2006

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PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006		Complete if Known	
		Application Number	10/609,206
		Filing Date	June 26, 2003
		First Named Inventor	Daniel J. POTTER, et al.
		Examiner Name	Diane D. Yabut
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3734	
TOTAL AMOUNT OF PAYMENT	(\$) 1,240.00	Attorney Docket No.	0B-044600US / 82410.0054

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card
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<input type="checkbox"/> Deposit Account	Deposit Account Number: 50-1129
Deposit Account Name: Wiley Rein & Fielding LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
						Fee (\$)	Fee (\$)
Fee Description							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 =		x	=		Fee (\$)	Fee Paid (\$)	
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 =		x	=				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50	(round up to a whole number) x		=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): Request for Continued Examination						\$790.00	
Petition for Extension of Time (2 months)						\$450.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	36,576/47,558
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		Date	December 26, 2006